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The ramp: psychopathology of decision*

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Besides crematorium chimneys and piles of naked, emaciated corpses, the selection scene on the railway ramp is one of the concentration camp images imprinted in human memory. A throng of women, men, elderly, children, rich and poor, handsome and ugly had marched in front of the SS physician standing in a posture of a ruler and judge. A small gesture of his hand had decided whether the other person, standing in front of him, will be sent immediately to a gas chamber, or will be given a chance to survive: at least days or months. There was something of the Last Judgement in this scene; a hand gesture directing to the fires or creating a possibility of survival. Those waiting for the verdict were usually not aware of their future. However, they knew, that a small gesture of a hand is meaningful and of great importance in their life, but the meaning was unclear until a head in gas-mask appeared in a ceiling hole in a fake bath. Those prisoners who knew that selection means to be sent to gas, were using the remnants of their strengths to keep erect, walk energetically in aiming at a good impression on the SS physician, to be directed to his right.

One of the paradoxical features of the concentration camp life was, one presumes, that in its overwhelming greyness, true Nacht und Nebel, it was exceptionally clear-cut. Events, subtle in normal life, revealing itself in discrete colours and shades, and because of this sometimes even unnoticed, here appeared as dramatic, in unusual proportions, evoking the observer's horror and wonder for human nature. That is why an analysis of concentration camp life offers a possibility to understand many phenomena of human life, which in normal circumstances pass unnoticed due to their subtleness and ambiguity. Some analogy can be found between this situation and psychiatry. The latter studies human life phenomena in enlarged proportions, and thus making them available for observation. Exceptional expressiveness of the camp experience can also explain its deep engraving into memory. Many concentration camp survivors still have camp night dreams, and some of the camp life images govern their imagination.

A friendly gesture, word or smile, customary in everyday life, could save there somebody's life, restore a person's courage. Feeling of resignation, longing for an end of everyday hardships, thoughts of passing away without a trace, as rainy days pass, in concentration camp often ended with death. Who did not want to live any longer, often did not wake up the next morning. Friendships founded in the camp were so strong, that they lasted against time, often taking the place of other previous or later relationships. For the survivors, friends from the camp stay for ever the closest, and the only ones able to understand them. Good and bad features of human nature, which in normal life compose complicated character of every human being, in concentration camp extended to the dimension of heroism, holiness and martyrdom, or monstrous brutality, egoism, cruelty and degenerated cynicism. One can quote many examples. The life on the death edge, situation in which one false step, an incorrect decision or simple accident could lead to the prisoner's annihilation or towards brutal violence in which one was losing humanity,

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were probably the reason of such a sharp outlining of human features and rules.

The same sharp outlines concerned the problem of decision. The ramp situation covered three variants of decision making: that who decided the fates of other human beings, that who knew what is ahead of them and decided to overcome it, and others who did not know what had been prepared form them, and in their doubts, anxiety and uncertainty were making accidental, often senseless decisions.

These three variants are present also in everyday life.

The easiest to imagine are experiences of those who proclaimed verdicts. Maybe they felt sometimes like playing a role of the Almighty on the Last Judgement, or they were feeling tiredness and boredom. Did they believe to be fulfilling their duties of cleaning the race, or were they in hurry to be somewhere else, thinking about having a rest after their heavy duty, wanting to wash any trace of pang of conscience in alcohol. A hand gesture deciding on the other human beings' life, may be, rather a result of an accident then thinking through, that for example: every tenth or twentieth could be offered life.

In human life it is difficult to avoid situations which involve decisions about other people's fates, as well as those, in which somebody else decides on our fate. A scope of power and position in social hierarchy usually corresponds with the importance of decision. The decision is more evident with a size of the group it refers to, and an impact it has on their lives. Nevertheless, every decision concerning other human beings has a heavy load of responsibility. One can even question the right to take such responsibility at all.

Those who had decided on life or death of thousands of people on the ramp, did not feel responsible for their fate, or, what is also possible, felt responsible in a negative sense, feeling responsibility for efficient annihilation of people who were perceived as disgrace to humanity. It should be assumed, that they suffered from a pathological lack of imagination. Otherwise, a gesture of the hand would not be so easy. They acted as automatons: the more and the faster, the better.

It happens to everybody to decide on other person's fate. These are not easy decisions. Therefore norms of various kinds, prescribing a decision to conditions, are helpful in such situations. For a judge, such norms would be constituted by law, for the physician - his knowledge on diagnostics and prognosis, and for a teacher - examination requirements range. The more objective decision is going to be, the more important is the role of the norms, which intend to eliminate subjective factors, especially emotional. When relying on norms, decision becomes normative. That means the decision is no longer one's own, but would be everybody's in the same situation; relying on the same norms, everybody would make the same decision. In this sense, justice is blind. Ideally a just person does not see the other person with his own eyes, but from a standpoint of the norms he is representing. In this way of thinking, one could conclude, that "ideally just" SS physician would be that one, who blindly followed the norms imposed by his superiors: and send the strongest to the camp, and all the rest to gas chambers. His decision would not involve any subjective elements, especially emotional - automaton in action. But the absurd of such a conclusion could be in the fact, that the human being is normally incapable of making absolutely just decisions and to bind his eyes as the mythological Themis. Those deciding on the other person's fate are not only unable to follow the norms strictly, but have to see him, to empathise, to imagine his past, present and future situation, etc. All these mental functions connected with the decision making process require an emotional involvement. Every teacher, physician and judge – professionals deciding on other people fate – are aware of this. And, they are not replaceable by even the most efficient computer.

In contrast, the example of the SS physician, performing a selection process on the ramp, confronts us with the importance of the emotional factor in decision making; especially decisions which concern other people. Other people constitute the most significant environment for a human being and therefore decisions concerning them are the most important and emotionally involving in the highest degree. A basic emotional decision in regard to another human being is this: approach or escape. These two directions contain a variety of emotional shadows. But, the directions itself can be described as an attitude of sympathy, antipathy and indifference. For the

SS physician, the Jews he selected were repulsive (antipathy), or at least completely indifferent. He was brought up in such an attitude or such ideas were implanted to him. He did not perceive prisoners as human beings, he was not interested in them, except as objects for pseudoscientific experiments, or robbery: for sure he did not think about approaching them, to chat, or ask about their feelings. Emotional distance is essential for war propaganda; citizens' contacts with the enemy are restricted to a minimum; the enemy's image is presented in the worst possible colours.

When people in close emotional relations start to feel distant, lose interest and do not understand each other any more – this usually is the disruption of the emotional union.

Physicians-prisoners had to decide many times on their patients' life or death, too. Certainly those decisions had to be difficult, but they could not avoid them; there was life saving medication only for a few; not everybody could be saved from selection, etc. They had to choose: who is to be sentenced for death, which person can be offered a chance to survive. An absurd analogy can be drawn - that they decided in a similar way as the SS physicians did. The absurd in this conclusion is based on not paying attention to the difference in emotional attitudes. Physicians-prisoners wanted to help their patients at any stake, even those who could not be helped and those, whom they had to sentence for death against their will. For the SS physicians, the patients were an alien and indifferent element, to be eliminated sooner or later.

Throughout this century[1] the transformation of the natural environment of human beings into a technological one, presents a technological view of the other person; that means human features are becoming less important, replaced by features enforcing effective functioning of techno-social machinery. This is, probably, one of the most dangerous aspects of contemporary civilization. Behaviour of the physician on the ramp, being the extreme realisation of this approach, should be a warning.

Relatively few prisoners, who understood the meaning of the SS physician's hand gesture, represent another variant. Some were in prostration and accepted their fate indifferently, unable to make any decision, take any action to adopt a posture of a strong and healthy man, being at the end of their strength, in a "Muslim" state. There were, however, prisoners who decided to survive at all cost, overcoming exhaustion, illness, weakness and apathy. They were able to mobilize their strength with an extreme effort, bring their emaciated body to an upright position and walk with springs in their feet in front of SS physician. Even children marching in front of the SS-men walked on tiptoes tried to touch with their heads a bar, whose level delineated life and death. That exceptional effort was not always effective, as often the pure accident and "the judge" fantasy decided whether a prisoner was sent to the gas-chamber or was allowed to live some time more. Prisoners had accepted an exam conditions anyway; they were doing their best to be as their oppressors wanted to see them; the numbers still suitable for work. The concentration camp regime demanded strengths and working until complete exhaustion and death would come. The number had to function effectively and till the end; a German sense of order and economy did not allow for life of the numbers unsuitable to work on the Third Reich's benefit.

Acceptance of the model of behaviour designed for prisoners by concentration camps creators was the first requirement for the camp life. An "admission ceremony", intended to erase habits of the earlier life-style and enforce the camp model, was not invented by the camp life organisers. It exists, of course not in such dramatic form - in various social institutions; especially is those which require quick adaptation of the new member to obligatory norms. Old patterns of behaviour, especially those which are inconsistent with the new ones have to be eliminated; and, at the same time new, obligatory patterns have to be enforced. One of the examples is that for conscripts in the army. Usually newcomers have such a difficult time not only in an army, but also in a new workplace, new school or kindergarten, etc. Entering a new social group has always its price. The more rigorous are the group behaviour forms, the more difficult the trial time. With time, the new behavioural forms become automatised, and performed without a decision making process concerning if and how they should be done. But achieving this stage requires learning. The enrolled soldier learns to sa-

[1] The 20th century

lute; at first clumsy, later he performs the saluting automatically, without hesitance and at minimal will effort.

Taking on the new forms does not always mean their inner acceptance. A soldier can elegantly salute his superiors, which does not mean he respects them. Taking on some forms without inner acceptance is called conformism. In spite that something is performed against conviction, that the decision is not one's own, but someone else's, imposed from the outside, the act is, with time, performed as effectively as that which follows ones' own choice. Rebellion against the imposed form cannot be too strong and has to be weaker with time; otherwise it would paralyse all learning processes and performance of the new forms of behaviour. In hypnosis, a span of the other's will is wider than the one's own. Hypnotic suggestion can lead to a performance which is impossible even at one's own strongest will effort, e.g. increasing muscle tension to rigidity, influencing the vegetative system to slow down or accelerate the hearth rate, constricting the arteries etc., influencing perception (e.g. of pain, hearing, seeing), activating memory (e.g. from early childhood), etc. Nevertheless a hypnotist is not able to impose upon the hypnotised person anything contrary to the latter's will, e.g. to kill somebody or himself.

The majority of concentration camp prisoners did not accept the norms of life being enforced on them, with an exception of those who wanted to imitate the camp rulers; they incorporated their persecutors' structure of thinking and as in the case of proselytes, were more eager in following the norms. At the beginning of incarceration, when the prisoners were completely lost; the "admission ceremony" mentioned above was helpful. Being overwhelmed made it easier to behave automatically, follow the regime rules and put aside what they were used to in their lives. With time, they were becoming indifferent to events which earlier evoked terror and repulsion; they were also less sensitive to their pains and suffering. Many of the camp activities were becoming automatic; they automatically adopted an upright position with their hats off seeing SS-men, automatically took their places at roll calls, marched to work, etc. Automation was the necessity. One could not hesitate if an act should or should not be performed; it had to be done immediately and in the most effective way; otherwise one could be severely beaten or killed.

The ramp situation was an exam for the prisoner: is he still capable to perform functions of the camp prisoner, or is he ready for the gas-chamber or the death injection only. That is why, with the maximum effort he tried to pass the exam. Every institution has its exam situation, checking capabilities of their members. Those unable to perform their duties properly are excluded. In the camp, exclusion was synonymous with death.

Death, being an everyday reality in concentration camps, enforced immediate decisions; there was no time for careful thinking which way to choose or consider, which choice would be better, which worse. Action had to be instant; a moment of hesitation would end in death. There was no place for error; a false decision could end in death. A soldier in the battlefield is in a similar situation; there is not enough time for thinking and hesitations; the majority of actions are performed automatically; without consciousness being fully involved.

Risk of death, changes the time perspective of human life. In normal conditions, the future extends to an undetermined end of life. Even the elderly or those seriously ill do not fully recognize the close limits of their life; they believe to still have a free space of the future before them. The free space allows to choose between activities, errors can be corrected; there is time for hesitation and for conscious decisions.

The time perspective changes at high risk situations. As the future shortens, it becomes extremely intense and important. Closeness of death makes the decisions more important; erroneous ones can bring death, correct ones - victory. All decisions which are not directly connected with survival become worthless. Forms of behaviour become reduced to basic ones, only those connected to the quest for life. All that used to be till now the content of life and was determining the acts of will is excluded, as that which is unimportant. In such situations nobody thinks about questions tormenting him in everyday life. Everyday problems and decisions appear to be ridiculous in situations when life is at risk. At the same time decisions have to be quick, there is no time for careful consideration of all "for" and "against", this way or that. Often decisions are made impulsively. Sometimes

reflection comes only after the life risk situation is over; why this action rather then that one was taken. In normal conditions one would not be able to decide so quickly on taking appropriate action (bad choice cannot be remembered – bad choice ended with death).

The way of behaving in life, at situations of risk, is usually not an act of the free, conscious will, but rather a kind of reflex, an automatic response. We feel responsible for it, and the community usually assesses it similarly; moreover, often such situations are regarded as a test for the value of the person's character.

Is this attitude accurate? An inner conviction prompts, that terminal situations are the ultimate probe for the person's merits, nevertheless rational thinking opposes such an approach. How could it be, that the most important decision, focusing on human merits would be that, which does not allow time for careful assessment of arguments pro and contra, but be made in a sudden illumination on its "appropriateness", or completely automatically? What empowers us to assess decisions made in the terminal situation, deprived of the fundamental attribute of conscious decision – thinking, through alternative activities and carefully choosing the proper way of action?

Contradiction between an inner conviction and rational thinking results from a presumption, that a decision is equal to an act of will, the will being the highest phenomenon of mental life, steering human behaviour. The background of this presumption is, it seems, the Cartesian model of man, extremely dualistic, in which the body is a mechanism directed by the mind. An act of will is an order sent to this mechanism. As such it has to be a kind of quintessence of mental life; it cannot be something as impulse, a reflex, something not thought through.

Approach toward the nature, human being included, is being formed to the great extent, by technological models. What man had created is easier to understand. A mechanical approach in biology perceives living creatures as complicated mechanisms. This approach allowed medicine to study the human organism. Mechanisms can be manipulated freely; it can be dismantled, which makes scientific cognition possible. Mechanistic conceptions opened the way for scientific medicine. Nevertheless a mechanism is unable to act from within, it has to be empowered from outside, and has to be steered. This was the beginning of problems. Human beings have the souls, and only people have free will; animals have neither soul nor free will, so they behave as automatons, reacting in a specific way to specific stimuli. Mentally ill people had no free will, as their soul was ill. Followers of the dualistic approach were also in trouble to explain how the mental is connected with the somatic, and to find a point where mental and somatic come together. Descartes, as we know thought that the pineal gland is a switch between the mental and physical. By rejecting the existence of the soul, one had to reject the problem of free will. Determinism was a consequence. Biological rules referred to the human being too; man was fully explained by them, having no freedom of choice. By the end of the last century (19th) an optimistic concept was accepted, that even such a complicated mechanism as the human being can be fully understood by rules of physics and chemistry, with the movement of elementary particles. This was an extremely important notion for the development of medicine and biochemistry; there is still a conviction in therapy, that everything can be solved in the chemical way.

Since World War II, a new technological model based on self-steering mechanisms has been developed. The term used reflects, that the problem of decision making (act of will in psychological terminology), which had been a trouble for the mechanistically oriented biologists, was approached with a technological solution. A system steering an air defence gun barrel decides itself how the barrel should be positioned and when the ammunition is to be sent. Everybody who used a gun knows that pulling a trigger is connected with some hesitation and tension, necessary to choose the best moment and aim properly. Experienced riflemen decide on the proper moment quicker; sometimes the best shot is given automatically. A complicated process of decision making, which many students perceive as the most important mental activity, can be performed better by a machine, than by a human being. It does not mean that machines have the souls, nor that mental life can be replaced by a machine. Nevertheless, machines are capable of performing some activities understood until only recently as attributes of the human psyche:

logical thinking and decision making, and that fact requires a revision of the concept of the psyche. For example the psyche cannot be identified with a particular function any longer , e.g. the act of will. We do not have a satisfying definition of life, or definition of subjective aspects of life, which is described as soul or psyche.

The ability of decision making in self-steering machines is regulated by three components: programming of the task, input of information from the outside, especially these concerning effects of action (feed-back), and memory. These three elements form a decision, which can be given in the form of an elementary answer("yes" or "no") as in calculators, or in a continuous form (modulated answer) as in the analogue machines.

Cybernetic models helped to understand the brain activity. On the other hand, cybernetics profited from the results of neuroscience (the brain cortex network by Lorente de Nó was used in designing various self-steering equipments). The neurone's morphological structure indicates that a decision is made within it. Many dendrites collect information from the surroundings (in addition to information from within a cell body via the axo-somatic synapses), but information from the neurone goes via one axon only. It is within the neurone's body, that the incoming signals are integrated and the decision made - what information is to be sent out.

A structure of an inter-neurone connection allows for some sent signals to come back (closed circuits). This enables feedback. A neurone is informed on the results of its action. Incoming signals are recorded. Hyden hypothesised [2], that a mechanism of memory is the change in the DNA and RNA structure resulting from in-coming information in neurones. This is an attractive hypothesis combining phylogenetic memory (heredity) with onto genetic memory within the same biochemical mechanism. The task programmed in a neurone - if Hyden's hypothesis will be proven - is the DNA (a genetic substance) modified by neural cell activity.

So, neurone fulfils conditions necessary for decision making in self-steering systems. And, as in these systems decisions can be of a "yes -no" type, or quantitative type. In the first one, there is a full discharge of the neurone (functional, or spike potential), of maximal size, and independent from the size of impulse, or there is no discharge. As in computers, the 0-1 language is used (1- discharge; 0- no discharge). In the second one there is a local change of electric potential (local potential or generative potential), proportional to the size of the impulse.

Millions of neurones with various kinds of connections form a network. There is a hierarchy in this net: a single neurone decision depends on that of other neurones. Some groups of neurones form a kind of working groups on specific problems (neural centres). Decision in-coming to such a group, is of global character: perform or stop a particular activity; performance details are not worked on.

Hierarchy in the decision process is connected with selection. Not all information can get higher. Part of it has to be rejected. The criterion for selection is importance of information for the organism. The selection is so evident, that it can be seen in the anatomical study. For example: the human retina is build of 6 millions cones and 110 millions rods, but the optic nerve - only 1 million fibres. As Walsh wrote [3]: "the retina tends to capture elements of possible biological meaning and to reject the rest". Out-coming information is organised in an opposite way; decision "from up" is copied in the case of a less important effector, or individual; - if more important. A classical example can be the movement field in the cortex. Hand, mouth or tongue representations are much bigger than those for body or legs muscles. That is why the homunculus representing cortex representation looks so ridiculous. Its deformation results from inequality among the human body executive units; muscles of the back are plebeian in comparison with the muscles of the hand or tongue. This distortion in anatomical proportions is much smaller in animals; importance of particular effectors is distributed more evenly. In the evolution process, the main manner of man's action became the grasping activity of the hands and speech activity; so, the role of these movement elements is bigger in comparison with the rest of the movement apparatus. In animals, a balance between effectors has been preserved. The importance scale refers to signals in-coming to the nervous system too. Selection is performed according to this scale. In consequence an image of the surrounding world is distorted; we see what is important for us.

The central symptom of the neurasthenic syndrome, both organic and psychogenic, is a disorder of the hierarchy in the central nervous system's work, selection including. Signals of less importance, usually repressed, activate the central nervous system to the same degree as the important ones; it creates a chaos (cybernetic "noise"), resembling a bad cybernetic system, in which the central organ knows everything and decides on everything. In consequence it does not know anything and decides on nothing. In hysteric conversion the situation is opposite; some functional systems become excluded from a general hierarchy of the central nervous system and become autonomic; this results, on a clinical level, with paralysis or hyperactivity. In social systems analogical autonomisation appears when authorities, in congruence with the individuals' benefits, artificially intervene in their life. In such a situation, opposing organisations are being created to enable a discharge of tendencies repressed by the authority.

The third - besides hierarchy and selection - characteristic of the central nervous system work, essential in decision making, is collectivity. A single neurone makes decisions, but its role is meaningless, if it is not supported by decisions of other neurones. And vice versa, the decision of a single neurone depends on other neurones' decision; responding to a signal coming from other neurones it can respond "yes" or "no" (functional potential), or limit its response to a local reaction. Local reactions, activating the part of a neurone, prepare it to a final answer "yes" or "no". In spite of mutual interactions and a collective character of the neurones' work, they keep their individuality; their own rhythm of work - making decisions: alternative "yes" or "no", or quantitative (local reaction). These elementary (single neurone) decisions build the group decisions. Groups of neurones are connected by common tasks and, consequently, common decisions too. Hierarchy and specialisation develops. Groups are subdued to others in an chain of dependencies. One signal only is sufficient to activate a sequence of events, sometimes quite a complicated one.

The problem of epilepsy seems to be in disruption in the structure of mutual dependency and collective character of the neurones work. A group of neurones starts to discharge in their own rhythm, not obliged - one could say - by the work of other neurones. That rhythm is transmitted to the other neural cells step by step, resulting in the general epileptic discharge. Comparing the central nervous system work to that of a symphonic orchestra, in which each musician plays in his specific way, but all of them together play a melody, an epileptic seizure could be a situation created by one of them suddenly stroking a drum, independently from the general melody. The drum influences other musicians, and all start to perform the same rhythm. Approaching neurones discharge as its alternative a (yes or no) decision and an epileptic seizure could be perceived as an example of extreme freedom of decision, leading to extreme de individuation and slavery. An epileptic seizure is an antithesis of collective character of the central nervous system's work, which is based on close interdependence of the neurones' decision; a break in this interdependence creates a totalitarian unification of decisions. Variety of individual rhythms is replaced by the only, common rhythm.

A collectivity of the decision decreases with a repetition of the task. New tasks activate the whole nervous system, and in sequence - the whole organism. Subjectively, this is experienced as concentration on a particular activity, deliberation on the way of performance, inner tension connected with the decision process; often accompanied by vegetative symptoms. The statement on the whole organism involvement in decision making is not an exaggeration. Nevertheless, with task repetition, the decision is gradually more and more easy, so the choice of an adequate functional structure becomes automatic. A particular activity is performed by the most suitable part, not the whole nervous system. Realisation follows the effort of the economy principle, as it happens in phylogenetic and ontogenic development.

The organism's cells specialise in particular activities, and in this way, they free the other cells from being involved in activities the first ones are specialised in. One should not forget, that the whole signal system, receptivity, nervous and effectual, has developed as a group of cells specialised in three basic functions: receiving signals, transmission of signals, and reacting to signals.

The specialisation process does not end with phylogeny but is continued in individual development. A child learning to walk, speak, write etc., activates its whole receptivity system to these activities. Watching child behaviour, one can see the effort it engages to choose the proper form of movement and its consequent performance. The whole will effort is concentrated on the activity. With time, the activity becomes automotive, performed without any hesitance, one's own command is enough: walking, speaking and writing etc., to activate the complicated chain of events leading to the activity performance. The problem of choice and decision, characteristic for the nervous system work, does not disappear with automation, but is limited to a particular, specialised part of the system; the rest being not involved. In a difficult situation, an activity, once automatic, becomes conscious again (e.g. hiking in tough conditions requires a conscious decision of each step); the decision becomes again a general, not regional one, as it happens with automatic activities.

An automation problem is closely related to the problem of decision hierarchy. Quanta of decision, which means decisions of particular neurones, are connected in smaller and bigger groups. Particular groups are specialised in particular problems. E.g. selection of signals incoming to the nervous system, steering particular vegetative or movement activity, co-coordinating of decisions etc. Position in decision hierarchy is higher with the number of groups involved. Life brings new tasks, so decisions of the highest hierarchy position have to be formed permanently. With a repetition of the task, the decision goes down in hierarchy, with the function economy principle; groups necessary for directing the particular task are activated. This is how automation is done.

Three factors influence the decision style: theme (programme), tempo of choosing and changeability. Theme, of course depends on the genetic programme encoded in the nucleus of the neurone, nevertheless the history of it depends on the neurone's history. Stimuli of the same kind, with time, will develop typical decisions. The neurone will specialise in a given kind of problems, and will solve them in a specific way. The theme could be e.g. selection of impulses coming from retina receptors; selection will, in a typical way, depending on impulses coming from neurones situated higher in the hierarchy. That is why human perception of the surrounding world depends on the person's mood, emotional tone, attitude towards environment, involvement, kind of occupation, etc.

Theme is related to a speed of decision making. The narrower the theme, the quicker decision. Narrowly specialised neurones are much quicker in the "yes" or "no" response in comparison with those less specialised, collecting various signals from various parts of neural system (e.g. cortex neurones). It can be supposed, that in the non-specialised neurones, quantitative responses dominate over alternative ones. The tempo of decision making depends on a length of the reflex arch. Decisions involving a number of neurones require more time than one made within a smaller loop. With automation, decisions are made quicker. Changeability of the decision depends on the level of perseverance, which means repetition of a kind of reaction type independently of the in-coming information. The higher the level of perseverance, the more stable the decision. In the brain, especially in the cortex, closed loops of neurones can often be met, in which a signal out-going from neurone A, passing a series of neurones: B, C, D, etc., comes back to neurone A, and can circulate, theoretically endlessly in the loop. Such systems increase the stability of decision.

An attempt of understanding the problem of the decision within a scope of contemporary neurophysiology is a kind of provisional hypothesis, which has to be changed with an increasing body of knowledge of the neural system physiology. Progress in neurophysiology is connected with progress in technology; the latter one results in new research methods, and allows for the development of the new theoretical models, bringing us closer to understanding the activities of the brain (e.g. the computer model allows for a better understanding of the living brain actions than the telephone switchboard). Perception and the action connection principle (the reflex arch principle) is valid here, as in other domains of life; we perceive the world parallel to the way we influence the world; that means - we live in the world we create.

It would be a serious misunderstanding to make the decision in a neuropsychological sense

equal to the psychological one. Presumably, the problem of decision has engaged people since self-reflection appeared. This is one of the main questions in philosophical thought, in psychology and psychiatry. Psychologists and psychiatrists try to understand reasons of a particular decision in every case studied; the problem of behaviour motivation is closely connected. Besides, everybody is asking themselves the same question and tries to answer it in a most possibly rational way. Rationality is not equal with rightness of understanding of ones' own or other's decision. An example could be someone, who when influenced by a hypnotic or subliminal suggestion, that means one not registered in the consciousness (a method used sometimes in visual advertising in the West) performs the suggested decision, but being unaware of the suggestion, finds a rational explanation for his action.

It seems that there are analogies between the decision in a neuropsychological sense and the decision in a psychological sense. Some of them deserve attention, as they can make understanding of the complicated act of will easier.

Alternative and quantitative decisions, the two kinds of decisions used by the nervous system, can be compared in mental life, to a choice between alternative possibilities and continuous hesitation; the latter however, not being a decision, creates a climate for the decision.

The collective character of the nervous system's work responds to an integration principle in mental life; conflicting emotions, thoughts and tendencies, create a more or less harmonious wholeness altogether, one typical for each person and the founding of his/her identity. Conscious decision is a result of this integrity, so it sometimes requires a reasonable amount of effort, as creation of a wholeness from oppositional tendencies is not an easy task.

The substance of decision is selection. What has been rejected does not disappear without trace. Notion of this, one could say obvious fact, we owe to Freud. Analysing neurotic symptoms, dreams and slips of tongue, he proved with no doubts, the existence of the repressed. In an obsessive compulsive neurosis, the ability to decide is evidently weakened by obsessions, compulsions and phobias. A fight with this strange and rejected by consciousness mental element leads nowhere; it only increases the obsessive-compulsive experience. What had been rejected in selection, now takes revenge over what had won selection. Normally, only a small part of the selection process goes on in the consciousness. We are permanently making choices and decisions, however majority of this process goes on beyond our consciousness; only later, we are sometimes surprised with some of our decisions.

In schizophrenia a mechanism of struggle between two contradictory possibilities, normally hidden, becomes open. Such a pathological unveiling of the selection process, concerns mainly the choice between basic emotional attitudes. This choice is normally made beyond consciousness; one cannot force himself to love, hate nor fear. Steering emotions is also impossible in schizophrenia, nevertheless the struggle between contradictory emotional attitudes - so strong that none can win - becomes often dramatically open. An impossibility of choosing the basic emotional attitude, influences the whole patient's mental life and behaviour. The basic emotional attitude forms the cornerstone for more detailed activity forms. The patient extends his hand in a gesture of welcome, and takes it back immediately; takes a seat, and gets up; his facial expression reflects contradictory emotions, usually with no correspondence to the ongoing situation.

Collectivity of decision reveals itself in social life too. One person's decisions influence the decisions of the other. In concentration camp life this phenomenon had an exceptionally strong impact. In a state of extreme exhaustion or during the initial period of imprisonment, the prisoner was loosing his ability of choosing, he was following what his close inmates did; walked there, where he was push to go. Getting out from this state of automatism was indispensable for survival. The ability to decide is the fundamental attribute of life. The inmate's help, someone's supportive words etc. were bringing back the ability to choose. The helper facilitated the decision making; "I want" was formed from a collective "we want".

The problem of automation, essential for the nervous system economy of work, indicates the recognised fact, that nothing disappears in nature, that every decision is encrypted in neurones and influences the next ones. This way the next decisions are easier; they do not engage the whole nervous system, but its part only, which

is necessary for the task performance. We talk about automation, in a psychological sense, when some activities in consequence of repetition, do not involve consciousness any longer; decisions are made beyond the consciousness threshold. The process is essential for every training; SS-men training including.

Now, I should try to answer the question, which turned me to the deliberations presented. Where is a threshold of responsibility for one's actions? The problem of responsibility is not medical, but rather ethical, legal, philosophical, nevertheless it is still interesting for a physician, in spite of the fact that a position of the judge is contradictory to the medical profession. It is not a task for a physician to assess if a person's conduct is good or bad, or to what degree this person is responsible for his/her doings.

From the two options: that one is responsible only for fully conscious decisions, or that one is responsible for all his decisions; the second one is closer to the biological approach. The first covers only small part of life in which decisions are made. Full awareness is the condition of responsibility for decision. But, taking into consideration not a moment only, but the whole life of the person whose act is being assessed, we are able to reach a point in life history, in which the decision for the assessed act had been born, but disappeared later from consciousness in result of repression or automation; in a critical moment the act itself was performed impulsively or automatically, without participation of "free will"; nevertheless it does not mean, that the essence of the act was never present in the person. Moreover, it was present stronger than in a conscious decision, consciousness being an external part of our life, being developed in relation with a new situation; and the subconscious decision is an expression of what in the life of this person was coming back repeatedly, or was placed deeply within him or her. It would be a reversion of the notion qui dormit, non peccat. Night dream, alcohol intoxication, according to proverb in vino veritas reveals the true image of the human being better than his or her life in the awakened state, in which decisions often mask his/her essential truth. It is obvious, that in the concentration camp life, a varnish of everyday, normal life was quickly washed off; what remained was the naked person. It this sense, the camp was a test for human value.

The third variant of the ramp situation referred to the majority of prisoners, those unaware of the fate awaiting them immediately. SS-men tried to support this unawareness until the end. That is why their behaviour was relatively civilised. Maybe some of the prisoners had felt a strangeness of the situation as well as the approaching annihilation. The mind opposed such intuitive anticipation and suggested concentrating on the usual business – looking for water, food, caring for close ones, belongings, plans for the nearest future, etc. This was a territory for decisions; they were similar to those being made previously, before imprisonment. The nearest future known, they would be different.

This is a situation similar to these lived through by everybody in everyday life. The future is unknown; nevertheless one is entering it with one's decisions, hoping it will be formed according to one's wishes. Projecting into the future is the characteristic of life. For many, once the plan of action is chosen; its realisation begins. The choice itself is entering the future and determining the way one goes. The ramp situation reveals deceitfulness of this way; the fate can cut it in any point. Our life experience, however, does not make our tendency to project ourselves into the future any weaker. This tendency characterises life. In depression, with a decrease in life dynamics the tendency to project into the future becomes weaker too; the future seems to be black and decisions extremely difficult. In a normal condition, the human being does not turn away from the future; even in the most difficult moments one does not lose the ability to decide; this way one conquers future.

The three variants of the ramp situation presented were selected from many possible ones related to the problem of decision; nevertheless, many concentration camp situations, being crystal clear, make understanding of the problem easier.

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